FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

[illegible] 1995 MAY -1 PM 12:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J96502** **(6)**

1. Corporate Name

ETS MARINE ELECTRONICS, INC.

Principal Place of Business
1107 N. WARD ST.
TAMPA FL 33607

Mailing Address
1107 N. WARD ST.
TAMPA FL 33607

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/09/1987
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # etc. — 22
Suite, Apt. # etc. — 27
City & State — 23
City & State — 28
24 25 29 30

4. FEI Number: 59-2862367 — [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes [ ] Yes [X] No

9. Name and Address of Current Registered Agent

CASSATO, JOHN P.
1107 N. WARD ST.
#1240
TAMPA FL 33607

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to Section [illegible] 607.0505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The corporation is duly authorized to do business in Florida and the principal place of business or registered agent has been at the address given in accordance with Section 607.0505, Florida Statutes.

SIGNATURE
(Required if registered agent is a corporation) (If registered agent is an individual, signature required)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
Title	D	Title	[ ] Change [ ] Addition
Name	JOHNSON, MEL	Name	
Street Address	14308 ARBOR HILLS RD.	Street Address	
City, State, Zip	TAMPA FL	City, State, Zip	
Title	PTS	Title	[ ] Change [ ] Addition
Name	CASSATO, JOHN P.	Name	
Street Address	3624 STERLING CIRCLE W.	Street Address	
City, State, Zip	TAMPA FL	City, State, Zip	
Title		Title	[ ] Change [ ] Addition
Name		Name	
Street Address		Street Address	
City, State, Zip		City, State, Zip	
Title		Title	[ ] Change [ ] Addition
Name		Name	
Street Address		Street Address	
City, State, Zip		City, State, Zip	
Title		Title	[ ] Change [ ] Addition
Name		Name	
Street Address		Street Address	
City, State, Zip		City, State, Zip	
Title		Title	[ ] Change [ ] Addition
Name		Name	
Street Address		Street Address	
City, State, Zip		City, State, Zip	

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that the corporation shall keep the office and/or registered agent for service of process in the State of Florida open to receive service of process and that the corporation is in compliance with the Florida Statutes.

SIGNATURE: JOHN CASSATO 4/28/95 813 289-1819
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Area Code & Daytime Phone Number

0292001 CP